Change in Company's premium or rate level produced by rate revision effective		2/1/2014	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>	
Automobile Liability Private			
Passenger Commercial			
2. Automobile Physical Damage Private Passenger Commercial			
3. Liability Other Than Auto			
4. Burglary and Theft			
5. Glass			
6. Fidelity			
7. Surety			
8. Boiler and Machinery			
9. Fire			
10. Extended Coverage			
11. Inland Marine			
12. Homeowners			
13. Commercial Multi-Peril			
14. Crop Hail			
15. Other <u>Farmowners Multi-Peril</u> Line of Insurance	\$4,158,516	+6.8%	
Does filing only apply to certain territory	(territories) or certain classes? If so, specify	: The entire state is affected	
Brief description of filing. (If filing follow our rates, rules, and forms. We are not	rs rates of an advisory organization, specify following the rates of an advisory organizati	organization): <u>We are filing to update</u> on.	
*Adjusted to reflect all prior rate change **Change in Company's premium level	which will result from application of new rate	s. rty & Casualty Insurance Co	
	Ailled Frope	Name of Company	
	Todd M	atteson, Pricing Analyst	
	<u> </u>	Official – Title	

FORM (RF-3)

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
Auton	nobile Liability Private		
Passe	•		
Comn	•		
	nobile Physical Damag		
	e Passenger		
Comn	3		
	ty Other Than Auto		
	ary and Theft		
Glass			
Fidelit	٧		
Surety	•		
•	and Machinery		
Fire	•		
Extend	ded Coverage		
	Marine		
Home	owners		
Comm	nercial Multi-Peril		
Crop I	Hail		
Other	Commercial Farm	\$852,259	+6.0%
	Life of Insurance		
	es? If so,	ain territory (territories) o	r certain
Dring	description of filing /If f	iling follows rates of an	advison.
	nization, specify	iling follows rates of an	advisory
	ization):	Increase rates for all co	verages by 6.0%
organ	120(1011).	moreage rates for all 60	voluged by 0.0 /0
	• • •		ult from application of nev
iales.		Ameri	can Economy Insurance Comp
			ame of Company
			duct Technician III
		··, · · · · ·	***

FORM (RF-3)

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
•	Automobile Liability Private Passenger		
	Commercial		
	Automobile Physical Damag Private Passenger		
	Commercial		
	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity		· · · · · · · · · · · · · · · · · · ·
	Surety Reiler and Machinery		
	Boiler and Machinery		
	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril	**************************************	
	Crop Hail		
	Other Commercial Farm Life of Insurance	\$1,989,049	+6.0%
	Does filing only apply to certai Classes? If so,	n territory (territories) o	r certain
	specify: No No		
	Brief description of filing. (If fil	ing follows rates of an	advisory
	Organization, specify		
	organization):	Increase rates for all co	verages by 6.0%
	*Adjusted to reflect all prior rat **Change in Company's premi		ult from application of ne
		um level which will res	
	**Change in Company's premi	um level which will res American S	states Insurance Company
	**Change in Company's premi	um level which will res American S Na	

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective New 8/7/2013, Renewal 9/12/2013

(1)	(2) Annual Premium	(3) Percent
Coverage	 Volume (Illinois) * 	_ Change (+or-) **
Automobile Liability Priv	vate	
Passenger		
Commercial		
Automobile Physical Da	mag	
Private Passenger	_	
Commercial		
Liability Other Than Auto	0	
Burglary and Theft		
Glass		
Fidelity		·
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other Commercial Umbrella	\$3,868,911	1.3% (estimate)
Life of Insurance	2	
Classes? If so,	certain territory (territories)	or certain
specify:	No, applies to all territories.	
Brief description of filing	g. (If filing follows rates of a	n advisory
Organization, specify		
organization):	Commercial Umbrella	rate revision.
*Adjusted to reflect all p		
**Change in Company's	premium level which will re	sult from application of new

Auto-Owners Insurance Company

Name of Company

Jennifer Smith, Manager, Work Comp, Life and other Liability Actuarial

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective New 8/7/2013, Renewal 9/12/2013

	(1)	(2) Annual Premium	(3) Percent
_	Coverage	Volume (Illinois) *	_ Change (+or-) **
	Automobile Liability Private		
	Passenger		
	Commercial		
	Automobile Physical Damag		
	Private Passenger		•
	Commercial		
	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity		
,	Surety		
	Boiler and Machinery		
	Fire		
i	Extended Coverage		
	Inland Marine		
. 1	Homeowners		
(Commercial Multi-Peril		
(Crop Hail		
	Other Executive Umbrella	\$2,212,206	4.8% (estimate)
	Life of Insurance	7 - 7 7	
	Does filing only apply to cert Classes? If so, specify: No, app	ain territory (territories) or	r certain
	Drief description of films (If	filing fallows rates of an a	ad vice m
	Brief description of filing. (If Organization, specify	ming rollows rates of an a	auvisory
	organization):	Executive Umbrella rate r	rovicion
	organization).	Executive officient rate i	evision.
	*Adjusted to reflect all prior r	ate changes	
	**Change in Company's prer rates.		ult from application of new
	iutos.	Auto-Owners Insu	ronoù Company

Name of Company

Jennifer Smith, Manager, Work Comp, Life and other Liability Actuarial

Cha	ange in Company's premium or rate le	vel produced by rate revision effective	9-1-2013 NB, 11-1-2013 RB
	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent <u>Change (+ or -)**</u>
	<u> </u>		
1.	Automobile Liability Private		
	Passenger Commercial		
2.	Automobile Physical Damage		
	Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
15.	Other BOP	\$274,644	1.6%
	Line of Insurance		
_		9 1 November	Filing dans and only apply to
		erritories) or certain classes? If so, specify:	Filing does not only apply to
cen	ain territories. Filing applies to all clas	ses in all companies.	
Drio	f description of filing (If filing follows r	ates of an advisory organization, specify organization	anization):
	ase refer to the enclosed Actuarial Me		
FIE	ase refer to the enclosed Actuarian Me	morandum.	
*∆di	justed to reflect all prior rate changes.		
		nich will result from application of new rates.	
Ci	range in Company 3 premium level wi	non will result from application of new rates.	
		Consolidate	d Insurance Company
			me of Company
	-	,	
		Pollv Becker.	Product Technician III
			Official – Title

Change	in Company's premium or rate level prod	luced by rate revision effective:	August 15, 2013
	(1)	(2) Annual Premium	(3) Percent Change
	Coverage .	Volume (Illinois)*	(+ or -)**
1.	Automobile Liability		
1.	Private Passenger		<u> </u>
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	•		
14.			
15.	•		
16.	<u>-</u>	\$25,772,198	9.9%
10.	Line of Insurance		<u> </u>
	Line of insurance		
Does filin	ng only apply to certain territory (territorie	es) or certain classes? If so, specify	: The revision applies
o all terri		,	
			-
Brief desc	cription of filing. (If filing follows rates of	of an advisory organization, specify	organization):
With t	chis filing, we are revisi	ng our rating relative	ity factors for severa
	ages. Base rates are chang		
C.C.V.C.I.	<u> </u>		
	d to reflect all prior rate changes.		
**Change	e in Company's premium level which		
will res	sult from application of new rates.		
		COUNTRY Mutual Insurance C	Company
		Name of Company	
		01 -00	
		Occharl a South	
		Richard A. Smith	
		Chief Property/Casualty Actuary	y
		Official and Title	

Change in Company's premium or rate level prod	fuced by rate revision effective	01/15/14
(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent <u>Change (+ or -)**</u>
 Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners 		
 13. Commercial Multi-Peril 14. Crop Hail 15. Other Personal Liability 	2,820	14.5%
Line of Insurance Does filling only apply to certain territory (territorie	s) or certain classes? If so, specify	: <u>No</u>
Brief description of filing. (If filing follows rates of Revision of Dwelling Liability rates be	an advisory organization, specify o used on our current loss cost multip	rganization): lier of 1.77 and ISO loss cost filing DL-2013-RLA1.
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which will	result from application of new rates	
	was a state of the first of the state of the	Employers Mutual Casualty Company Name of Company
	Linda. So	aonson - Assistant Vice Pasident

FORM (RF-3)

SUMMARY SHEET

Change in Company's premit	um or rate level	I produced by rate	revision
effective 01/01/2013	•	•	

	(1)	(2) Annual Premium	(3) Percent
_	Coverage	Volume (Illinois) *	Change (+or-) **
	Automobile Liability Private		
	Passenger		
	Commercial		
	Automobile Physical Damag		
	Private Passenger		
	Commercial		
	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
	Other Dwelling & Homeowners	\$17,600,393	+5.8
	Life of Insurance	Ψ11,000,000	
	Ene of madranee		
	Does filing only apply to certai	n territory (territories) or (certain
	Classes? If so,		
	specify: No No		
			
	Brief description of filing. (If fil	ing follows rates of an ac	Ivisory
	Organization, specify		
	organization):	Revised base rates, ad	ditional coverages, and some
	premium modifiers.		· · · · · · · · · · · · · · · · · · ·

Foremost Insurance Company Grand Rapids, MI

Name of Company

David J. Kelly, Assistant Vice-President State Filings

Official – Title

^{**}Change in Company's premium level which will result from application of new rates.

FORM (RF-3)

(1) Coverage	(2) Annual Premium - Volume (Illinois) *	(3) Percent Change (+or-) **
Automobile Liability Private Passenger Commercial		
Automobile Physical Damag Private Passenger		
Commercial		
Liability Other Than Auto		
Burglary and Theft Glass		
Giass Fidelity		
Surety		
Boiler and Machinery	***************************************	
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other Businessowners Life of Insurance	\$9,340.00	5.695%
Does filing only apply to cert Classes? If so,	ain territory (territories) or	certain
•	ase see Cover Letter.	
Brief description of filing. (If Organization, specify	filing follows rates of an a	dvisory
organization):	Please see Cover Letter.	
*Adjusted to reflect all prior r	ate changes	
	nium level which will resu	It from application of ne
rates.		
		ual Insurance Company
		me of Company

1.

2

3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14.

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

| Change in Company's premiue effective 12/01/2013 | ım or rate level produced | by rate revision |
|--|-------------------------------|------------------|
| (1) | (2)
Annual Premium | (3)
Percent |
| Coverage | Volume (Illinois) * | Change (+or-) ** |
| Automobile Liability Private | | |
| Passenger | | |
| Commercial | | |
| Automobile Physical Damag | | |
| Private Passenger | | • |
| Commercial | | |
| Liability Other Than Auto | | |
| Burglary and Theft | | |
| Glass | | |
| Fidelity | | |
| Surety | | |
| Boiler and Machinery | | |
| Fire | | |
| Extended Coverage | | |
| Inland Marine | | |
| Homeowners | | |
| Commercial Multi-Peril | | |
| Crop Hail | | |
| Other Businessowners | \$2,377,400.72 | 7.450% |
| Life of Insurance | | |
| Does filing only apply to certa | in territory (territories) or | certain |
| Classes? If so, | in terniory (terniories) of | Certain |
| • | se see Cover Letter. | |
| <u></u> | | |
| Brief description of filing. (If f | iling follows rates of an a | advisory |
| Organization, specify | - | - |
| organization): | Please see Cover Letter. | |

Frankenmuth Mutual Insurance Company

Name of Company

Glen Gerwatowski, Product Analyst I

Official – Title

^{*}Adjusted to reflect all prior rate changes.

^{**}Change in Company's premium level which will result from application of new rates.

| 8• | in Company's premium or rate level p (1) | (2)
Annual Premium | (3)
Percent |
|--------|---|---|--------------------------|
| | Coverage | Volume (Illinois)* | <u>Change (+ or -)**</u> |
| 1. | Automobile Liability Private Passenger Commercial | | |
| 2. | Automobile Physical Damage Private Passenger Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other Renters | 437,878 | +4.8% |
| | Line of Insurance | | . |
| Does f | iling only apply to certain territory (t | erritories) or certain classes? If so, spec | ify: |
| | description of filing. (If filing follow | s rates of an advisory organization, spec | ify organization): |
| ** C | djusted to reflect all prior rate change hange in Company's premium level wasult from application of new rates. | | |

Garrison Property And Casualty Insurance Company

Name of Company

Daniel Dilley – Executive Director of Compliance

SUMMARY SHEET

| Change in Company's premium
revision effective January | | y rate |
|---|--------------------------------|-------------------------------|
| (1) | (2)
Annual Premium | (3) Percent Change (4 or -)** |
| <u>Coverage</u> | <pre>Volume (Illinois) *</pre> | Change (+ or -)** |
| Automobile Liability Private Passenger Commercial Automobile Physical Damage | | , |
| Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril | | |
| 14. Crop Hail
15. Other Direct Wind | \$1,309,355 | 20.0% |
| Line of Insurance | \$1,309,333 | 20.08 |
| Does filing only apply to certain If so, specify: No. | territory (territories)or | certain classes? |
| Brief description of filing. (If | filing follows rates of an | n advisory |
| Increasing rates 20%. | | |
| | | |
| * Adjusted to reflect all prior r
** Change in Company's premium lev
result from application of new | vel which will | nce Company |
| | Name of Compan | |
| • | • | - |

Ryan Schave - Actuary
Official - Title

H29219D

FORM (RF-3)

| (1)
Coverage | (2)
Annual Premium
Volume (Illinois) * | (3) Percent Change (+or-) ** |
|--|--|--|
| Automobile Liability Private | | |
| Passenger | | |
| Commercial | | |
| Automobile Physical Damag | | _ |
| Private Passenger | | |
| Commercial | | 4 |
| Liability Other Than Auto | | |
| Burglary and Theft | | |
| Glass | | |
| Fidelity | | |
| Surety | | |
| Boiler and Machinery | | |
| Fire | | |
| Extended Coverage Inland Marine | | |
| Homeowners | | |
| Commercial Multi-Peril | | |
| Crop Hail | N-1-1-1 | |
| Other Personal Liability | 1,625,669 | 0.1% |
| Line of Insurance | 1,020,000 | |
| Does filing only apply to certa Classes? If so, specify: Rates we | | or certain
under GMRC 1031 - Business Activ |
| Brief description of filing. (If f | iling follows rates of an | advisorv |
| Organization, specify | 9 | , |
| organization): | Independent Program. R | Rates were changed for some classes |
| under GMRC 1031 - Business Activities | | |
| | | |
| *Adjusted to reflect all prior ra
**Change in Company's premates. | | ult from application of new |
| | Grinnell Mutual R | Reinsurance Company |
| | | ame of Company |
| | Kimberley A. Ward | d, Actuary |
| | | Official - Title |

| | revision effective $\frac{11/01}{}$ | (2) | (3) |
|--------------------------------|---|--|---|
| | (1) | Annual Premium | Percent |
| | Coverage | Volume (Illinois) * | Change (+ or -)** |
| 1. At | tomobile Liability | | |
| | Private Passenger | | |
| | Commercial | | |
| 2. At | tomobile Physical Damage | | |
| | Private Passenger | | |
| Э т. | Commercial | | |
| | ability Other Than Auto | | |
| 5. G | | | |
| | delity | | |
| | rety | | |
| | oiler and Machinery | | |
| 9. F: | | | |
| 10. Ez | tended Coverage | | |
| 11. Iı | lland Marine | | |
| | omeowners | | |
| | ommercial Multi-Peril | | |
| | cop Hail | 4 104 645 | 12.00 |
| 15. O | ther Businessowners | 4,104,645 | 12.0% |
| | Line of Insurance | | - |
| | Line of Insurance | | |
| | filing only apply to certain | territory (territories)or | certain classes? |
| | | territory (territories) or | certain classes? |
| | filing only apply to certain | territory (territories)or | certain classes? |
| | filing only apply to certain | territory (territories)or | certain classes? |
| If so | filing only apply to certain specify: | | |
| If so
Brief | filing only apply to certain | filing follows rates of ar | |
| If so
Brief | filing only apply to certain specify: description of filing. (If | filing follows rates of arn): | n advisory |
| If so
Brief | filing only apply to certain specify: description of filing. (If | filing follows rates of aron): Increase Loss Cost Mu | n advisory
ltipliers |
| If so
Brief | filing only apply to certain specify: description of filing. (If | filing follows rates of aron): Increase Loss Cost Mu Implement new \$10,000 | n advisory
ltipliers
Deductible Wind or |
| If so
Brief
organ | filing only apply to certain specify: description of filing. (If ization, specify organization) | filing follows rates of aron): Increase Loss Cost Mu Implement new \$10,000 Hail Deductible Facto | n advisory
ltipliers
Deductible Wind or |
| If so Brief organ * Ad ** Ch | filing only apply to certain specify: description of filing. (If ization, specify organization) justed to reflect all prior ange in Company's premium le | Increase Loss Cost Mu Implement new \$10,000 Hail Deductible Facto rate changes. | n advisory
ltipliers
Deductible Wind or |
| If so Brief organ * Ad ** Ch | filing only apply to certain specify: description of filing. (If ization, specify organization) | Increase Loss Cost Mu Implement new \$10,000 Hail Deductible Facto rate changes. | n advisory
ltipliers
Deductible Wind or |
| If so Brief organ * Ad ** Ch | filing only apply to certain specify: description of filing. (If ization, specify organization) justed to reflect all prior ange in Company's premium le | Increase Loss Cost Mu Implement new \$10,000 Hail Deductible Facto rate changes. | n advisory
ltipliers
Deductible Wind or |
| If so Brief organ * Ad ** Ch | filing only apply to certain specify: description of filing. (If ization, specify organization) justed to reflect all prior ange in Company's premium le | Increase Loss Cost Mu Implement new \$10,000 Hail Deductible Facto rate changes. evel which will | n advisory
ltipliers
Deductible Wind or
rs |
| If so Brief organ * Ad ** Ch | filing only apply to certain specify: description of filing. (If ization, specify organization) justed to reflect all prior ange in Company's premium le | Increase Loss Cost Mu Implement new \$10,000 Hail Deductible Facto rate changes. vel which will rates. Grinnell Mutual Reinsura | n advisory ltipliers Deductible Wind or rs nce Company |
| If so Brief organ * Ad ** Ch | filing only apply to certain specify: description of filing. (If ization, specify organization) justed to reflect all prior ange in Company's premium le | Increase Loss Cost Mu Implement new \$10,000 Hail Deductible Facto rate changes. evel which will | n advisory ltipliers Deductible Wind or rs nce Company |
| If so Brief organ * Ad ** Ch | filing only apply to certain specify: description of filing. (If ization, specify organization) justed to reflect all prior ange in Company's premium le | Increase Loss Cost Mu Implement new \$10,000 Hail Deductible Facto rate changes. vel which will rates. Grinnell Mutual Reinsura | n advisory ltipliers Deductible Wind or rs nce Company |
| If so Brief organ * Ad ** Ch | filing only apply to certain specify: description of filing. (If ization, specify organization) justed to reflect all prior ange in Company's premium le | Increase Loss Cost Mu Implement new \$10,000 Hail Deductible Facto rate changes. vel which will rates. Grinnell Mutual Reinsura | n advisory ltipliers Deductible Wind or rs nce Company |
| If so Brief organ * Ad ** Ch | filing only apply to certain specify: description of filing. (If ization, specify organization) justed to reflect all prior ange in Company's premium le | Increase Loss Cost Mu Implement new \$10,000 Hail Deductible Facto rate changes. Evel which will rates. Grinnell Mutual Reinsura Name of Compan | n advisory ltipliers Deductible Wind or rs nce Company |
| If so Brief organ * Ad ** Ch | filing only apply to certain specify: description of filing. (If ization, specify organization) justed to reflect all prior ange in Company's premium le | Increase Loss Cost Mu Implement new \$10,000 Hail Deductible Facto rate changes. vel which will rates. Grinnell Mutual Reinsura | n advisory ltipliers Deductible Wind or rs nce Company |
| If so Brief organ * Ad ** Ch | filing only apply to certain specify: description of filing. (If ization, specify organization) justed to reflect all prior ange in Company's premium le | Increase Loss Cost Mu Implement new \$10,000 Hail Deductible Facto rate changes. Evel which will rates. Grinnell Mutual Reinsura Name of Compan | n advisory ltipliers Deductible Wind or rs nce Company y Actuary |

FORM (RF-3)

| | Change in Company's premit effective 1-1-2014 | ım or rate level produced | d by rate revision |
|-----|--|--|---|
| - | (1)
Coverage | (2) Annual Premium - Volume (Illinois) * | (3) Percent Change (+or-) ** |
| 1. | Automobile Liability Private | Volume (minois) | - Change (101) |
| •• | Passenger | | |
| | Commercial | | |
| 2 | Automobile Physical Damag | | |
| | Private Passenger | | • |
| | Commercial | | 110000000000000000000000000000000000000 |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other Farm Guard | \$5,552,385 | 0.2% |
| | Line of Insurance | | |
| * | Does filing only apply to certa Classes? If so, | ain territory (territories) o | r certain |
| | specify: no. | | |
| | | *** | |
| | Brief description of filing. (If f Organization, specify | iling follows rates of an a | advisory |
| | organization): | independent program. Inc | creases to Custom Farming and Feeding. |
| | Changes to GRMC 1031 Business Activ | | seases to ouston raming and reeding. |
| | Changes to GRING 1031 Business Activ | illes rate. | |
| | *Adjusted to reflect all prior ra **Change in Company's prem | | ult from application of new |
| | rates. | Grinnell Mutual Ro | einsurance Company |
| | | | ame of Company |
| | | Kimberley A. Ward | · |
| | | | Official – Title |

| Change in Company's premium or rate level produced by rate revision effective | | 01/15/14 | |
|--|---|---|--|
| (1)
<u>Coverage</u> | (2)
Annual Premium
<u>Volume (Illinois)</u> * | (3)
Percent
<u>Change (+ or -)**</u> | |
| Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Horneowners Commercial Multi-Peril Crop Hail | | | |
| 15. Other Personal Liability Line of insurance | 11,180 | 14.5% | |
| Does filing only apply to certain territory (territor) Brief description of filing. (If filing follows rates Revision of Dwelling Liability rates | of an advisory organization, specify or | | |
| *Adjusted to reflect all prior rate changes. **Change in Company's premium level which was a second or sec | will result from application of new rates. | | |
| | | Name of Company | |
| | Linda So | umson-Assistant Vice Presiden
Official - Title | |

| Change in Company's premium o | r rate level produced by rate revision effective | 9-1-2013 NB, 11-1-2013 RB |
|---|--|--|
| (1)
<u>Coverage</u> | (2)
Annual Premium
<u>Volume (Illinois)*</u> | (3)
Percent
<u>Change (+ or -)**</u> |
| Automobile Liability Private | | |
| Passenger Commercial | | |
| Automobile Physical Damage | | |
| Private Passenger Comm | porcial | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other BOP | \$273,751 | 1.6% |
| Line of Insurance | | |
| Does filing only apply to certain te certain territories. Filing applies to | erritory (territories) or certain classes? If so, specify: | Filing does not only apply to |
| certain territories. Tilling applies to | o all classes in all companies. | |
| Brief description of filing. (If filing f | follows rates of an advisory organization, specify or | ganization): |
| Please refer to the enclosed Actua | | |
| | | |
| | | |
| *Adjusted to reflect all prior rate cl | | |
| **Change in Company's premium | level which will result from application of new rates | • |
| | Indiana | Insurance Company |
| | | lame of Company |
| | · '' | and the second s |
| | Polly Becke | r, Product Technician III |
| | | Official – Title |

ILLINOIS DEPARTMENT OF INSURANCE

| Change in Company's premium or rate le | vel produced by rate revision effective | 2/1/2014 |
|--|---|--|
| (1)
<u>Coverage</u> | (2)
Annual Premium
<u>Volume (Illinois)*</u> | (3)
Percent
<u>Change (+ or -)**</u> |
| Automobile Liability Private | | |
| Passenger Commercial | | |
| Automobile Physical Damage Private Passenger Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other Farmowners Multi-Peril Line of Insurance | \$880,330 | +6.8% |
| Does filing only apply to certain territory (| territories) or certain classes? If so, specify | y: The entire state is affected |
| Brief description of filing. (If filing follows our rates, rules, and forms. We are not fo | rates of an advisory organization, specify ollowing the rates of an advisory organizati | organization): <u>We are filing to update</u>
on. |
| *Adjusted to reflect all prior rate changes. **Change in Company's premium level w | hich will result from application of new rate | s. |
| | • • | |
| | Nationwide | Agribusiness Insurance Co |
| | | Name of Company |
| | Todd M | latteson, Pricing Analyst |
| | | Official – Title |

| Change in Company's premium or rate | level produced by rate revision effective | 9-1-2013 NB, 11-1-2013 RB |
|--|---|--|
| (1)
<u>Coverage</u> | (2)
Annual Premium
<u>Volume (Illinois)</u> * | (3)
Percent
<u>Change (+ or -)**</u> |
| Automobile Liability Private | | |
| Passenger Commercial | | |
| 2. Automobile Physical Damage
Private Passenger Commercial | | |
| 3. Liability Other Than Auto | | |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other BOP | \$664,188 | 1.7% |
| Line of Insurance | | |
| | (territories) or certain classes? If so, specify | Filing does not only apply to |
| certain territories. Filing applies to all cl | asses in all companies. | |
| Brief description of filing. (If filing follows | s rates of an advisory organization, specify o | rganization): |
| Please refer to the enclosed Actuarial M | | |
| | | |
| *Adjusted to reflect all prior rate change **Change in Company's premium level | s.
which will result from application of new rates | 3 . |
| | The Netherl | ands Insurance Company |
| | | Name of Company |
| | · | Table 5. Company |
| | Polly Becke | er, Product Technician III |
| | | Official Title |

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective New 8/7/2013, Renewal 9/12/2013

| (1) | | (2) | (3) |
|------------------------|-------------------|---|--|
| 0 | | Annual Premium | Percent |
| Coverage | | Volume (Illinois) * | Change (+or-) ** |
| Automobile Liabilit | y Private | | |
| Passenger | | | |
| Commercial | | | |
| Automobile Physic | _ | | |
| Private Passenger | | | |
| Commercial | | | |
| Liability Other Than | | | |
| Burglary and Theft | | | |
| Glass | | | ************************************** |
| Fidelity | | | |
| Surety | | *************************************** | |
| Boiler and Machine | ery | | |
| Fire | • | | |
| Extended Coverag | е | | |
| Inland Marine | | | |
| Homeowners | | | |
| Commercial Multi-F | Peril | | ************************************** |
| Crop Hail | | | |
| Other Commercial Umbro | | \$2,387,565 | 0.5% (estimate) |
| Life of Insu | rance | | |
| | ply to certai | n territory (territories) o | r certain |
| Classes? If so, | . | | |
| specify: | No, appii | es to all territories. | |
| Brief description of | f filing. (If fil | ling follows rates of an a | advisory |
| Organization, spec | cify | | • |
| organization): | - | Commercial Umbrella rat | e revision. |
| | | | |
| *Adjusted to reflec | t all prior rat | te changes | |
| **Change in Comp | | | ult from application of new |
| rates. | | Own or to see | |
| | | Owners Insurance | e Company |

Name of Company

Jennifer Smith, Manager, Work Comp, Life and Other Liability Actuarial

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective New 8/7/2013, Renewal 9/12/2013 .

| - ~ | (1)
Coverage | (2) Annual Premium Volume (Illinois) * | (3)
Percent
Change (+or-) ** |
|-------------------------|---|--|------------------------------------|
| 1. | Automobile Liability Private | volume (minors) | - Change (101-) |
| ٠. | Passenger | | |
| | Commercial | | |
| 2 | Automobile Physical Damag | | |
| _ | Private Passenger | | • |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| , .
8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 9.
10. | Extended Coverage | · · · · · · · · · · · · · · · · · · · | |
| 10.
11. | Inland Marine | | |
| 11.
12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 13.
14. | Crop Hail | | |
| 1 4 .
15. | • | #1.040.007 | 5.00(/ 1) |
| 15. | Other Executive Umbrella Life of Insurance | \$1,319,067 | 5.0% (estimate) |
| | Life of insurance | | |
| * | Does filing only apply to certa Classes? If so, | ain territory (territories) o | r certain |
| | specify: No, app | olies to all territories. | |
| | Brief description of filing. (If | filing follows rates of an a | advisory |
| | Organization, specify organization): | Executive Umbrella rate | revision |
| | organization). | Executive Official rate | revision. |
| | | | |
| | *Adjusted to reflect all prior re**Change in Company's prer | | ult from application of new |
| | rates. | | •• |
| | | Owners Insurance | e Company |

Name of Company

Jennifer Smith, Manager, Work Comp, Life and Other Liability Actuarial

| Ch | ange in Company's premium or rate le | vel produced by rate revision effective | 9-1-2013 NB, 11-1-2013 RB |
|-------|--|--|-------------------------------|
| | (1) | (2)
Annual Premium | (3)
Percent |
| | Coverage | Volume (Illinois)* | <u>Change (+ or -)**</u> |
| 1. | Automobile Liability Private | | |
| | Passenger Commercial | | |
| 2. | Automobile Physical Damage | | |
| | Private Passenger Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| | Extended Coverage | | |
| 11. | Inland Marine | | |
| . — . | Homeowners | | |
| | Commercial Multi-Peril | | |
| | Crop Hail | | |
| 15. | Other BOP | \$2,477,206 | 2.1% |
| | Line of Insurance | | |
| Doe | es filing only apply to certain territory (| territories) or certain classes? If so, specify: | Filing does not only apply to |
| cer | tain territories. Filing applies to all clas | sses in all companies. | |
| | | | |
| | | ates of an advisory organization, specify org | anization): |
| Ple | ase refer to the enclosed Actuarial Me | morandum. | |
| | | | |
| *^~ | ljusted to reflect all prior rate changes. | | |
| | | nich will result from application of new rates. | |
| | nange in Company's premium level wi | ilcit will result from application of new rates. | |
| | | Peerless Indem | nnity Insurance Company |
| | | | me of Company |
| | | | |
| | | Polly Becker, | Product Technician III |
| | | | Official - Title |

FORM (RF-3)

| | Change in Company's premiue ffective 08/30/2013 | ım or rate level produced
 | by rate revision | | |
|---|---|--|--|--|--|
| - | (1)
Coverage | (2) Annual Premium Volume (Illinois) * | (3) Percent Change (+or-) ** | | |
| | Automobile Liability Private | | | | |
| | Passenger | | | | |
| | Commercial | | | | |
| | Automobile Physical Damag | | | | |
| | Private Passenger | | • | | |
| | Commercial | | | | |
| | Liability Other Than Auto | | | | |
| | Burglary and Theft | | | | |
| | Glass | | | | |
| | Fidelity | | | | |
| | Surety | | | | |
| | Boiler and Machinery | | | | |
| | Fire | | | | |
| | Extended Coverage | | | | |
| | Inland Marine | | | | |
| | Homeowners | | | | |
| | Commercial Multi-Peril | | | | |
| | Crop Hail | | | | |
| | Other Recreational Vehicle | \$298,665 | +2.5% | | |
| | Life of Insurance | | | | |
| | Does filing only apply to certa Classes? If so, | ain territory (territories) or | certain | | |
| | specify: No | | *** | | |
| | Brief description of filing. (If the Organization, specify organization): Adjusted base rates, discounts, limits/deductibles, driver class. | Revised rates and rules filing for | recreational vehicle liability and physical damage | | |
| | Adjusted base rates, discounts, limits/deductibles, driver class, surcharges, market factors, transfer, settlement option/veh age, zip-state match, driving record surcharge rate stability factors, symbol, value class, vehicle age, vehicle use, comp on claim surcharge. Added initial quote source variable and USAA association discoun | | | | |
| | | | <u> </u> | | |
| | *Adjusted to reflect all prior ra
**Change in Company's pren | | It from application of new | | |
| | | nium level which will resu | | | |
| | **Change in Company's pren | nium level which will resu
Progressive Direct | Insurance Company | | |
| | **Change in Company's pren | nium level which will resu
Progressive Direct | Insurance Company
me of Company | | |

FORM (RF-3)

| | Change in Company's premi effective 08/30/2013 | ium or rate level produced | by rate revision |
|---|--|--|--|
| - | (1)
Coverage | (2) Annual Premium Volume (Illinois) * | (3) Percent Change (+or-) ** |
| 1. | Automobile Liability Private Passenger Commercial | | |
| 2 | Automobile Physical Damag
Private Passenger
Commercial | | • |
| 3.
4.
5. | Liability Other Than Auto
Burglary and Theft
Glass | | |
| 6.
7.
8. | Fidelity Surety Boiler and Machinery | | |
| 9.
10.
11. | Fire Extended Coverage Inland Marine | | |
| 12.13.14. | Homeowners
Commercial Multi-Peril
Crop Hail | | |
| 15. | Other (Motorcycle) Line of Insurance | 2,130,058 | 0.88% |
| • | Does filing only apply to cert Classes? If so, specify: NO | ain territory (territories) or | certain |
| | Brief description of filing. (If Organization, specify organization): | Revised rates and rules filing for motor | cycle liability and physical damage. Adjusted base rates |
| | value class, model year replaces vehicle age, and introduced Ca | | |
| | *Adjusted to reflect all prior r
**Change in Company's pre-
rates. | rate changes. | |
| | | Progressive Direct | Insurance Company |
| | | Mike lannetta - Prici | |
| | | C | Official – Title |

FORM (RF-3)

| <u>-</u> | (1) | (2)
Annual Premium | (3)
Percent | | |
|--------------------|---|---|--|--|--|
| | Coverage | - Volume (Illinois) * | Change (+or-) ** | | |
| 1. | Automobile Liability Private | | | | |
| | Passenger | | | | |
| _ | Commercial | | | | |
| 2 | Automobile Physical Damag | | | | |
| | Private Passenger | | | | |
| _ | Commercial | | | | |
| 3. | Liability Other Than Auto | | | | |
| 4.
- | Burglary and Theft | | | | |
| 5. | Glass | | | | |
| 6.
- | Fidelity | | | | |
| 7. | Surety | | | | |
| 3. | Boiler and Machinery | | | | |
| 9. | Fire | · | | | |
| 10. | Extended Coverage | | | | |
| 11. | Inland Marine | | | | |
| 12. | Homeowners | | | | |
| 13. | Commercial Multi-Peril | | | | |
| 14. | Crop Hail | | | | |
| 15. | Other (Motorcycle) | 20,145,425 | -0.15% | | |
| | Line of Insurance | | | | |
| • | Does filing only apply to cert
Classes? If so, | tain territory (territories) or | certain | | |
| | specify: NO | | | | |
| | | | | | |
| | Brief description of filing. (If | filing follows rates of an ac | lvisory | | |
| | Organization, specify | | | | |
| | organization): | Revised rates and rules filing for motoro | cycle liability and physical damage. Adjusted base rates | | |
| | discounts, limits/deductibles, driver class, surcharges, engine displacement, market factors, length of ownership, years experience, rate stability factors, symbol/driver age, | | | | |
| | value class, model year replaces vehicle age, and introduced Carried Contents and Enhanced Injury Protection (the latter consists of separate Death Indemnity and Income Loss benefits) | | | | |
| | *Adjusted to reflect all prior i **Change in Company's pre | | from application of new | | |
| | rates. | Durania - tua Mantha | I Co | | |
| | | | rn Insurance Company | | |
| | | | ne of Company | | |
| | | Mike lannetta - Prici | | | |
| | | C | Official – Title | | |

FORM (RF-3)

SUMMARY SHEET

| | (1) | (2) Annual Premium Volume (Illinaio) * | (3) Percent |
|----------------------------|---|--|---|
| | Coverage | - Volume (Illinois) * | Change (+or-) ** |
| | utomobile Liability Privat | le | |
| | assenger | | |
| | ommercial | | |
| | itomobile Physical Dam | ag | • |
| | ivate Passenger | | |
| | ommercial | | |
| | ability Other Than Auto | | |
| | irglary and Theft | | |
| - | ass | | |
| | delity | | |
| | irety | | |
| Во | iler and Machinery | | |
| Fir | e | | |
| Ex | tended Coverage | | |
| Inl | and Marine | | |
| Ho | meowners | | |
| Co | mmercial Multi-Peril | | |
| Cr | op Hail | | |
| Ot | her Recreational Vehicle | \$3,729,791 | +0.9% |
| | Life of Insurance | | |
| | | eartain tarritany (tarritarias) ary | certain |
| CI | oes filing only apply to c
asses? If so,
pecify: No | ertain terniory (terniories) or | · |
| CI
sp | asses? If so,
pecify: No | (If filing follows rates of an ac | |
| CI
sp
Br | asses? If so,
pecify: No | | |
| CI
sp
Br | asses? If so, necify: No necify: No necify. | (If filing follows rates of an ac | dvisory |
| CI
sp
Br
Or | asses? If so, No | (If filing follows rates of an ac | ivisory ecreational vehicle liability and physical damag |
| CI
sp
Br
Oi
or | asses? If so, necify: No necify: No necify: No necify: No necify necify ganization, specify ganization): Necify neception is neception in the neception of the | (If filing follows rates of an ac | IVISORY ecreational vehicle liability and physical dama ption/veh age, zip-state match, driving record surchar |
| Br Or Adjurate *A | asses? If so, necify: rief description of filing. rganization, specify ganization): usted base rates, discounts, limits/deductibles, drestability factors, symbol, value class, vehicle and djusted to reflect all price Change in Company's p | (If filing follows rates of an acceptable of the control of the co | dvisory ecreational vehicle liability and physical damag ption/veh age, zip-state match, driving record surcharg quote source variable and USAA association discou |
| Br Or Adjurate *A | asses? If so, necify: No necify: No necify: No necify: No necify reparization, specify ganization): stability factors, symbol, value class, vehicle and djusted to reflect all prices. | Revised rates and rules filing for nature rules, market factors, transfer, settlement of age, vehicle use, comp on claim surcharge. Added initial for rate changes. | divisory ecreational vehicle liability and physical damage ption/veh age, zip-state match, driving record surcharg quote source variable and USAA association discount t from application of new |
| Br Or Adjirate *A | asses? If so, necify: rief description of filing. rganization, specify ganization): usted base rates, discounts, limits/deductibles, drestability factors, symbol, value class, vehicle and djusted to reflect all price Change in Company's p | Revised rates and rules filing for no river class, surcharges, market factors, transfer, settlement or age, vehicle use, comp on claim surcharge. Added initial for rate changes. or emium level which will result Progressive Northe | dvisory ecreational vehicle liability and physical damage ption/veh age, zip-state match, driving record surcharg quote source variable and USAA association discou |

FORM (RF-3)

| _ | effective 08/30/2013 (1) | (2) | (3) |
|--------------------|--|---|--|
| - | Coverage | Annual Premium Volume (Illinois) * | Percent
Change (+or-) ** |
| 1. | Automobile Liability Private | - Volume (minors) | Orlange (101) |
| •• | Passenger | | |
| | Commercial | | |
| 2 | Automobile Physical Damag | | |
| | Private Passenger | | • |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6.
- | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9.
10 | Fire | | |
| 10.
11. | Extended Coverage Inland Marine | | |
| 11.
12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other Recreational Vehicle | \$646,889 | +2.0% |
| | Life of Insurance | | |
| * | Does filing only apply to certa Classes? If so, specify: No | ain territory (territories) or o | certain |
| | Brief description of filing. (If | filing follows rates of an ac | lvisory |
| | Organization, specify | | • |
| | organization): | Revised rates and rules filing for re | ecreational vehicle liability and physical damage |
| | Adjusted base rates, discounts, limits/deductibles, driver cla | ass, surcharges, market factors,transfer, settlement of | otion/veh age, zip-state match, driving record surcharge |
| | rate stability factors, symbol, value class, vehicle age, ve | ehicle use, comp on claim surcharge. Added initial c | uote source variable and USAA association discount |
| | *Adjusted to reflect all prior ra
**Change in Company's pren-
rates. | | from application of new |
| | Tates. | Progressive Univers | sal Insurance Company |
| | | | ne of Company |
| | | Mark Kalothi - Pricing | • • |
| | | C | fficial – Title |

FORM (RF-3)

| | (1) | (2)
Annual Premium | (3)
Percent |
|---|--|---|---|
| _ | Coverage | Volume (Illinois) * | _ Change (+or-) ** |
| | Automobile Liability Private | | |
| | Passenger | | |
| | Commercial | | |
| | Automobile Physical Damag | | |
| | Private Passenger | | |
| | Commercial | | |
| | Liability Other Than Auto | | |
| | Burglary and Theft | | |
| | Glass | | |
| | Fidelity | | |
| | Surety | | |
| | Boiler and Machinery | | |
| | Fire | | |
| | Extended Coverage | | |
| | Inland Marine | | |
| | Homeowners | | |
| | Commercial Multi-Peril | | |
| | Crop Hail | | |
| | Other (Motorcycle) | 8,451,427 | -0.28% |
| | Line of Insurance | | |
| | Does filing only apply to certain Classes? If so, | n territory (territories) or | certain |
| | specify: NO | | ······ |
| | Brief description of filing. (If fil | ing follows rates of an a | dvison |
| | Organization, specify | ing follows rates of all a | a visor y |
| | organization): | Revised rates and rules filing for moto | rcycle liability and physical damage. Adjusted base |
| | discounts, limits/deductibles, driver class, surcharges, engine d | | |
| | value class, model year replaces vehicle age, and introduced Carried | | |
| | *Adjusted to reflect all prior rat | e changes. | |
| | **Change in Company's premi | _ | It from application of new |
| | rates. | | • • |
| | | Progressive Univer | rsal Insurance Company |
| | | Nai | me of Company |
| | | Mike lannetta - Pric | ing Analyst |
| | | | |

| | Change in Company's premium or rate | level produced by rate revision effe | ctive 1/1/2014 |
|-----|---|--------------------------------------|---|
| | (1) | (2)
Annual Premium | (3) Percent |
| | Coverage | Volume (Illinois)* | <u>Change (+ or -)**</u> |
| 1. | Automobile Liability | | |
| | Private Passenger
Commercial | | |
| 2. | Automobile Physical Damage | | |
| ۷. | Private Passenger | | |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | 2.70/ |
| 15. | Other Comm Umbrella Line of Insurance | 1,087,244 | 3.7% |
| | description of filing. (If filing follows | | |
| Uml | orella minimum premium charged p | per layer of limit on "Standard" pe | olicies from \$500 to \$550. |
| * C | djusted to reflect all prior rate changes hange in Company's premium level wh sult from application of new rates. | | |
| | | | Selective Insurance Company of America (SICA) |
| | | _ | Name of Company |
| | | | Carl Scheuermann – Actuarial
Analyst |
| | | | Official - Title |

 $Carl\ Scheuermann-Actuarial$

Official - Title

Analyst

| | (1) | (2) | (3) |
|---|--|--|--|
| | Coverage | Annual Premium <u>Volume (Illinois)*</u> | Percent Change (+ or -)** |
| 1. | Automobile Liability | | |
| | Private Passenger | | |
| | Commercial | | |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | | |
| • | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft Glass | | |
| 5.
6. | Giass
Fidelity | | |
| 0.
7. | Surety | <u></u> | |
| 8. | Boiler and Machinery | | - |
| 9. | Fire | | |
| 10. | Extended Coverage | · | |
| 11. | Inland Marine | | |
| 10 | Homeowners | | |
| 12. | | | |
| 12.
13. | Commercial Multi-Peril | | |
| 13. | Commercial Multi-Peril
Crop Hail | | |
| 13.
14. | | 2,804,126 | 3.3% |
| 13.
14.
15. | Crop Hail Other Comm Umbrella Line of Insurance | | |
| 13.
14.
15.
oes f | Crop Hail Other Comm Umbrella Line of Insurance iling only apply to certain territory | (territories) or certain classes? If so, specify: | |
| 13.
14.
15.
Poes f | Crop Hail Other Comm Umbrella Line of Insurance iling only apply to certain territory | | |
| 13.
14.
15.
Poes f
No. | Crop Hail Other Comm Umbrella Line of Insurance iling only apply to certain territory of the complete | (territories) or certain classes? If so, specify: ws rates of an advisory organization, specify organization, | organization): |
| 13.
14.
15.
Poes f
No. | Crop Hail Other Comm Umbrella Line of Insurance iling only apply to certain territory of the complete | (territories) or certain classes? If so, specify: | organization): |
| 13.
14.
15.
Poes f
No. | Crop Hail Other Comm Umbrella Line of Insurance iling only apply to certain territory of the description of filing. (If filing followers to the Insurance Company of Am | (territories) or certain classes? If so, specify: ws rates of an advisory organization, specify organization, | organization):
e to amend the Commercial |
| 13. 14. 15. 200es f No. 200es f Un * A | Crop Hail Other Comm Umbrella Line of Insurance iling only apply to certain territory of the description of filing. (If filing followed to the Insurance Company of Amabrella minimum premium charged djusted to reflect all prior rate changed.) | (territories) or certain classes? If so, specify: ws rates of an advisory organization, specify of the erica and its affiliated companies proposed the erica and its affiliated companies proposed per layer of limit on "Standard" policities. | organization):
e to amend the Commercial |
| 13. 14. 15. 15. 16. 17. 18. 19. 19. 19. 19. 19. 19. 19. 19. 19. 19 | Crop Hail Other Comm Umbrella Line of Insurance diling only apply to certain territory of the c | (territories) or certain classes? If so, specify: ws rates of an advisory organization, specify of the erica and its affiliated companies proposed the erica and its affiliated companies proposed per layer of limit on "Standard" policities. | organization):
e to amend the Commercial |
| 13. 14. 15. oes f No. rief c Un * A | Crop Hail Other Comm Umbrella Line of Insurance iling only apply to certain territory of the description of filing. (If filing followed to the Insurance Company of Amabrella minimum premium charged djusted to reflect all prior rate changed.) | (territories) or certain classes? If so, specify: ws rates of an advisory organization, specify of the erica and its affiliated companies proposed the erica and its affiliated companies proposed per layer of limit on "Standard" policities. | organization):
e to amend the Commercial |
| 13. 14. 15. 15. 16. 17. 18. 19. 19. 19. 19. 19. 19. 19. 19. 19. 19 | Crop Hail Other Comm Umbrella Line of Insurance diling only apply to certain territory of the c | (territories) or certain classes? If so, specify: ws rates of an advisory organization, specify of the erica and its affiliated companies proposed the erica and its affiliated companies proposed per layer of limit on "Standard" policities. | organization):
e to amend the Commercial |
| 13. 14. 15. 15. 16. 17. 18. 19. 19. 19. 19. 19. 19. 19. 19. 19. 19 | Crop Hail Other Comm Umbrella Line of Insurance diling only apply to certain territory of the c | (territories) or certain classes? If so, specify: ws rates of an advisory organization, specify of the erica and its affiliated companies proposed the erica and its affiliated companies are also as a second the erica and its affiliated companies are also as a second the erica and its affiliated companies are also as a second the erica and its affiliated companies are also as a second the erica and its affiliated companies are also as a second the erica and its affiliated companies are also as a second the erica and its affiliated companies are also as a second the erica and its affiliated companies are also as a second the erica and its affiliated companies are also as a second the erica and a second t | organization): te to amend the Commercial tes from \$500 to \$550. |
| 13. 14. 15. oes f No. rief c Un * A | Crop Hail Other Comm Umbrella Line of Insurance diling only apply to certain territory of the c | (territories) or certain classes? If so, specify: ws rates of an advisory organization, specify of the erica and its affiliated companies proposed the erica and its affiliated companies proposed per layer of limit on "Standard" policities. which will Selection | organization): te to amend the Commercial tes from \$500 to \$550. |
| 113. 114. 115. 115. 116. 117. 117. 118. 118. 119. 119. 119. 119. 119. 119 | Crop Hail Other Comm Umbrella Line of Insurance diling only apply to certain territory of the c | (territories) or certain classes? If so, specify: ws rates of an advisory organization, specify of the erica and its affiliated companies proposed the erica and its affiliated companies proposed per layer of limit on "Standard" policities. which will Selection | organization): te to amend the Commercial tes from \$500 to \$550. |

| | (1) | (2)
Annual Premium | (3)
Percent |
|---------------|---|--|---------------------------|
| | <u>Coverage</u> | Volume (Illinois)* | <u>Change (+ or -)**</u> |
| 1. | Automobile Liability Private Passenger | | |
| | Commercial | | |
| 2. | Automobile Physical Damage
Private Passenger
Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other Comm Umbrella | 689,857 | 3.6% |
| | Line of Insurance | | |
| Ooes f
No. | iling only apply to certain territory (t | erritories) or certain classes? If so, specify: | |
| Sele | ctive Insurance Company of Ame | s rates of an advisory organization, specify or
rica and its affiliated companies proposed
d per layer of limit on "Standard" polici | e to amend the Commercial |
| | iorena minimum premium enarge | d per layer or mint on Standard perior | C3 HOII \$300 to \$330. |
| | | | |
| * A | djusted to reflect all prior rate change | es. | |
| ** C | hange in Company's premium level w | thich will | |

Selective Insurance Company of the Southeast (SICSE)

Name of Company

Carl Scheuermann – Actuarial Analyst

Official - Title

| Change | in Company's premium or rate level p | produced by rate revision effective | 11/01/2013 |
|----------|---|--|--|
| | (1) | (2)
Annual Premium | (3)
Percent |
| | Coverage | Volume (Illinois)* | <u>Change (+ or -)**</u> |
| 1. | Automobile Liability | | |
| | Private Passenger | | |
| | Commercial | | |
| 2. | Automobile Physical Damage
Private Passenger | | |
| • | Commercial | | |
| 3. | Liability Other Than Auto | : | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7.
8. | Surety Boiler and Machinery | | |
| o.
9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other Renters | 1,604,860 | +5.0% |
| | Line of Insurance | | |
| | | | |
| | filing only apply to certain territory (to | erritories) or certain classes? If so, | specify: |
| No | | | |
| Brief (| description of filing. (If filing follows | s rates of an advisory organization. | specify organization): |
| | Revision | s runes or uni way roory organization, | op, g |
| 11,000 | | | |
| * A | djusted to reflect all prior rate change | s. | |
| | hange in Company's premium level w | hich will | |
| re | sult from application of new rates. | | |
| | | | |
| | | | |
| | | | TT '4-1 C ' A-41 '1- |
| | | | United Services Automobile Association |
| | | | Name of Company |
| | | | Name of Company |
| | | | |
| | | | Daniel Dilley – Executive Director |
| | | | of Compliance |
| | | | Official - Title |

| Change | in Company | 's premium or rate level | produced by rate revision effective | 11/01/2013 |
|------------------------|--|----------------------------------|---------------------------------------|--------------------------|
| | | (1) | (2)
Annual Premium | (3)
Percent |
| | 9 | <u>Coverage</u> | Volume (Illinois)* | <u>Change (+ or -)**</u> |
| 1. | Private 1 | ile Liability
Passenger | | |
| 2. | | ile Physical Damage
Passenger | | |
| 3. | | Other Than Auto | • | |
| 4. | | and Theft | | |
| 5. | Glass | and There | | |
| 6. | Fidelity | | | |
| 7. | Surety | | | |
| 8. | • | d Machinery | , | |
| 9. | Fire | a machinery | | |
| 10. | | Coverage | | - |
| 11. | Inland M | _ | , | |
| 12. | Homeow | | | |
| 13. | | cial Multi-Peril | · · · · · · · · · · · · · · · · · · · | |
| 14. | Crop Hai | | | |
| 15. | Other | Renters | 1,675,608 | +4.9% |
| 15. | ouner | Line of Insurance | 1,075,000 | |
| No Brief C Rate R * A | description of Revision djusted to rehange in Co | | es. | |
| | | | | |

USAA Casualty Insurance Company

Name of Company

Daniel Dilley – Executive Director of Compliance

| ange | in Company's premium or rate level | produced by rate revision effective | e <u>11/01/2013</u> |
|----------|---|---------------------------------------|------------------------------------|
| | (1) | (2) | (3) |
| | `, | Annual Premium | Percent |
| | <u>Coverage</u> | <u>Volume (Illinois)*</u> | Change $(+ \text{ or } -)^{**}$ |
| 1. | Automobile Liability | | |
| | Private Passenger | | |
| | Commercial | | |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | | |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 7.
8. | Boiler and Machinery | | |
| o.
9. | Fire | | |
| | | | |
| 0. | Extended Coverage | | |
| 1. | Inland Marine | | |
| 2. | Homeowners | | |
| 3. | Commercial Multi-Peril | | |
| 4. | Crop Hail | | |
| 5. | Other Renters | 724,827 | +4.9% |
| | Line of Insurance | | |
| oes f | iling only apply to certain territory (t | erritories) or certain classes? If so | o, specify: |
| - | | | |
| | description of filing. (If filing follow devision | s rates of an advisory organization | n, specify organization): |
| ile iv | CVISION | | |
| * A | djusted to reflect all prior rate change | es. | |
| | nange in Company's premium level w | | |
| | sult from application of new rates. | | |
| | • • | | |
| | | | |
| | | | |
| | | | USAA General Indemnity |
| | | | Company |
| | | | Name of Company |
| | | | |
| | | | Daniel Dilley - Executive Director |
| | | | of Compliance |
| | | | Official - Title |